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OBSERVATIONS

ON

BILIOUS DISEASES,

COMPILED

FROM THE WORKS OF THE ABLEST MEMBERS
OF THE MEDICAL PROFESSION,

WITH REMARKS ON THE EXTRAORDINARY VIRTUES OF

DEVOTION'S LEXIPYRETA,

IN THE TREATMENT AND CURE OF

FEVER AND AGUE.

CHILL FEVER,
INTERMITTENT AND REMITTENT
FEVERS, DUMB AGUE, JAUNDICE,
LIVER COMPLAINT, ENLARGEMENT OF THE SPLEEN
AND LIVER, AND ALL THE VARIOUS FORMS
OF BILIOUS DISEASES INCIDENT
TO THE SOUTHERN AND
WESTERN STATES.

BY JOHN L. DEVOTION.

NEW YORK:

1852.

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BY JOHN L. DEVOTION,

In the Clerk's Office of the District Court of the United States for the
Southern District of New York.

DEVOTION'S LEXIPYRETA,

FOR THE PREVENTION AND CURE OF

FEVER AND AGUE,

CHILL FEVER, DUMB AGUE, INTERMITTENT AND REMITTENT
FEVERS, AND ALL THE VARIOUS FORMS OF
BILIOUS DISEASES.

THE unparalleled, and very flattering success which the Lexipyreta has met with, in the treatment and cure of Fever and Ague, since its first introduction [in the year 1848,] justly entitles it to public confidence, and gives it a pre-eminence over every other remedy for bilious diseases.

It has often been observed that, in certain regions of country where abundant vegetable decomposition accompanies an occasional overflow of the soil, and at the season when this decomposition is most rife, a class of diseases is apt to prevail, entirely distinct from those which arise from irregularities, or changes in the sensible qualities of the atmosphere. This result has been usually ascribed to æriform exhalations, which have received the name of *marsh miasmata* or *malaria*, because they are notoriously common in marshy places. These diseases are peculiar to certain localities in England, France, Holland, Italy, Spain, India, the United States, and other parts of the world, and are known under the name of Intermittent Fever, or Fever and Ague,—Remittent Fever—Dumb Ague—Chill Fever—Bilious Fever—Headache—Tic-Doloureux, &c.

The circumstances which appear to be essential to the production of malaria are heat, moisture, and vegetable decomposition. The peculiar morbid effects ascribed to this cause, and by which alone its existence can be recognized, seldom originate at a temperature under 60° F., even though vegetable decomposition may be going on. At 80° they are very prevalent, and are generally checked by the occurrence of frost. A certain continuance of the heat is not less necessary than a certain degree of it. Hence, miasmatic diseases scarcely ever prevail beyond the 56th degree of latitude; because, though many days in summer may be very hot, the warm season is short. The nearer we approach the equator, the more abundant, virulent, and pernicious does the poison become, wherever it is evolved, implying a greater intensity of the cause. Within the latitudes where there is a regular change of the seasons, they do not commonly make their appearance until the middle, and often not till the close of summer.

The development of this poison also requires a certain degree of moisture; and the places which it usually infests, are most generally remarkable for their humid and swampy character. A large quantity of moisture, however, often serves as a preventive. During heavy rains, for example, their morbid effects are less felt than after the rains have ceased, and the water has run off from the surface of the country, or been partially evaporated. In tropical latitudes, it is after the cessation of the rains, that the ravages of the malarious fevers commence.

In its medical sense, malaria is not simply bad or impure air, although the term is vaguely employed by many to express any mixed kind of contamination of the atmosphere. In its production, vegetable decomposition has been mentioned among the requisites. That it is so, is inferred from numerous circumstances attendant upon the development of the morbid influence. In no situations is this so powerful as in deltas, and along the banks of large tropical streams, which in their period of flood, bring down the washings of the soil, loaded with vegetable remains, and, upon subsiding, leave them reeking in the hot sun. It is also peculiarly destructive when grounds covered with a luxuriant vegetation are overflowed, so as to destroy the plants, and occasion their putrefaction. Hence, miasmatic diseases are apt to follow the submerging of meadows in order to increase their fertility, the forming of mill-ponds, and damming of streams for the purposes of navigation. Neighbourhoods, before remarkably exempt from disease, have thus become very unhealthy, and have not ceased to be so until the vegetable matter thus deprived of its life, has undergone complete decomposition. The draining of lakes, ponds, &c., is often followed by disease; because the organic matter, previously lying quiescent in their beds, is brought into a renewed movement of chemical re-action by exposure to the sun's heat. Hence, too, the increase of disease which often follows the commencement of cultivation, in a newly settled country, in consequence of the turning up of the soil, loaded with vegetable remains. If heat and moisture were alone adequate to produce malaria, we should find the fever prevailing among sailors when out at sea; but it is not so, whatever may be the temperature under which they cruise. It is when they approach the coast, or land upon it, that they are attacked.

The emanations from the surface of the earth, which form the sole exciting cause of Intermittent and Remittent Fevers, are gaseous or æriform, and are involved in the atmosphere; but they are imperceptible by any of our senses, and we are made aware of their existence only by their noxious effect; and the inference that they exist, was not made till within the last century and a half. It has, however, been a matter of common observation, that the inhabitants of wet and marshy situations were especially subject to these definite and unequivocal forms of disease. Lancisi, an Italian physician, was the first to put forth distinct ideas concerning the poisonous effects of malaria. The water of marshes has been examined under the microscope, and analyzed again and again, with a view to the discovery of the nature of this pestilential agent, but in vain. A more likely way to detect the noxious material, would seem to be by examining the *air* of malarious districts; and this has been done carefully and repeatedly by expert chemists; and with the same want of success. The poisonous principle eludes the test of the most delicate chemical agents.

One of the most interesting circumstances in relation to miasmata is their apparent affinity for moisture. Water appears to have the property of dissolving and retaining them, whether in a proper liquid state, or in that semi-liquid form in which it constitutes fogs and mists.

It is probably owing to this cause, that heavy and continued rains lessen the miasmatic influence. They wash the atmosphere clean of the noxious effluvia. Hence, too, the protective influence of floods and of deep water, which dissolve the miasm as it is generated, and prevent its escape by retaining it in solution. The greatest danger is after the waters have so far subsided, or been so far evaporated, as to be unable longer to dissolve the proceeds of the vegetable putrefaction. Persons on board of ships, and those on the sides of lakes opposite to the source of the exhalation, are much less exposed to disease than those at an equal distance by land, because the intervening water dissolves the miasmata in their passage.

Malarious diseases are endemic along every part of the low and level coast of Holland. In Italy, the Pontine marshes near Rome, have possessed for ages an infamous celebrity of the same kind. The whole of the district called the Maremma, which extends along the shores of the Mediterranean from Livorno to Terracina, a distance of two hundred miles, with few interruptions, and reaches back to the base of the Appennines, in a varying breadth from ten to forty miles, is rendered dangerous, and almost uninhabitable, by the vast quantity of malaria annually evolved from its soil.* In our own country, large districts are, for the same reason, prolific of disease.

The effects of this poison in all malarious districts are much more dangerous at *night* than in the day-time. Whether the poison be then more copiously evolved, or whether it be merely condensed and concentrated by the diminished temperature, or whether the body be at that time more susceptible of its influence, it certainly is most active and pernicious during the hours of darkness. To *sleep* in the open air at night, in such places, is almost to ensure an attack of the fever.

The miasmatic effluvium appears to rise by the heat of the sun, and to be so dispersed as to become innoxious, but to acquire a dangerous concentration by its union with the moisture, which forms the morning and evening dews. Its tendency is to settle on the ground. Whether this results from its specific gravity, or from its adhering to the moisture suspended in the lower strata of the atmosphere, or from some peculiar attraction for the earth's surface is a matter of doubt.

The morning and evening air is peculiarly injurious; so much so that persons who go out of their houses only during the day, after the fogs have dispersed in the morning, and before the dews descend in the evening, are apt to escape altogether.† Exposure, in the middle of the night is equally dangerous, and especially during sleep, when the power of resisting noxious agents is

* The late Bishop Heber, in his *Narrative of a Journey through the Upper Provinces of India*, gives the following striking picture of the influence of the malaria in that part of the world. It seems to be alike pestiferous to man and beast.

"I asked Mr. Boulderson if it were true that the monkeys forsook these woods during the unwholesome months. He answered, that not the monkeys only, but every thing which has the breath of life, instinctively deserts them from the beginning of April to October. The tigers go up to the hills; the antelopes and wild hogs make incursions into the cultivated plains; and those persons—such as military officers—who are obliged to traverse the forests in the intervening months, agree that so much as a bird cannot be heard or seen in the frightful solitude. Yet, during the time of the heaviest rains, while the water falls in torrents, and the cloudy sky tends to prevent evaporation from the ground, the forest may be passed with tolerable safety. *It is in the extreme heat, and immediately after the rains have ceased*, in May, the latter end of August, and the early part of September, *that it is most deadly*. In October the animals return. By the latter end of that month the wood-cutters and the cow-men again venture, though cautiously. From the middle of November to March, troops pass and re-pass—and, with common precaution, no risk is usually apprehended."

† Dr. Wood, of Philadelphia, says :

"I was formerly the attending physician of a public institution, containing more than a hundred inmates, among whom, during the sickly seasons to which our vicinity was subject, autumnal fever was very prevalent, until the direction was given, and carried into effect, not to allow any one to go out before breakfast, or after tea."

diminished. Hence the peculiar danger of sleeping in tents, in sickly regions. It has been observed that persons in low grounds, are more exposed to sickness than those who live in elevated positions; and instances have been recorded, in which lodgers upon the lower floor of a house have been attacked, while those upon the upper have escaped; and experience is uniformly in favor of the proposition, that the poison is most prevalent and destructive near the surface of the earth, and does not rise high into the atmosphere.

It has repeatedly been observed among the crews of ships, when off a malarious coast, that the sailors could go on shore through the day with impunity, while the men who remained on shore through the night, were many or all of them seized with the fever.* Those persons who, in summer, travel through the Pontine marshes, are admonished by Lancisi not to do so *by night*, as many had been accustomed to do, in order to avoid the great heat of the day: and similar advice is still given at Rome to all strangers. Though the passage requires but six or eight hours, there are numerous instances of travellers, who, in consequence of their having crossed the fens during the night, have been attacked with violent and mortal fevers. Brocchi, and several other writers, attribute the deadly influence of the malaria on the poor peasantry of the Roman Campagna to their defective clothing, and their want of fit shelter against the cold night winds, after the toil of a sultry day.

McCullough is of opinion that the winds are capable of carrying miasmata, either enveloped in clouds and fogs, or otherwise, a very considerable distance, even so far as five or six miles. This may perhaps explain why it occasionally happens that a low district, where the miasmata are extricated, is less unwholesome than a neighboring elevation, towards which a prevalent wind blows over the surface of production; and from the same cause, one side of a mountain may be very sickly, while the opposite side is remarkably healthy. The bank of a stream, in the direction of the ordinary winds, is sometimes more sickly than the opposite bank, though the latter may be nearer the spot where the cause originates.

In this way we may sometimes account for the occurrence of disease in spots, which seem to offer none of the circumstances, ordinarily considered essential to the production of malaria.

In what manner miasmata operate in producing disease cannot be known until we know their nature. The probability is, that they enter the circulation by means of absorption, and that the chief avenue through which they enter is the air-cells of the lungs. It is not impossible that they may also be absorbed through the skin, and even through the mucous coat of the stomach, which they may enter with the saliva. A full meal, and the stimulant influence of ardent spirit, are supposed to afford some protection against them. Absorption is probably impeded by these means, and thus far, they act as preventives of the malarious influences; but just in proportion to the protection which ardent spirit or other stimulant may yield, during the period of excitement, will be the greater liability to attack, when excitement shall be succeeded by depression.

* It is recorded by Dr. Lind, "that in 1766, the British ship-of-war Phoenix was returning from the Coast of Guinea. The officers and ship's company were perfectly healthy till they touched at the Island of St. Thomas. Here nearly all of them went on shore. Sixteen of the number remained for several *nights* on the island. Every one of these contracted the disorder, and thirteen of the sixteen died. The rest of the crew, consisting of two hundred and eighty men, went in parties of twenty or thirty on shore in the day, and rambled about the island, hunting, shooting, and so on: but they returned to the ship at night; and not one of those who so returned, suffered the slightest indisposition. Exactly similar events occurred the following year, with the same ship, at the same place, where she lost eight men out of ten, who had imprudently remained *all the night on shore*; while the rest of the ship's company, who, after spending the greatest part of the day on shore, always returned to their vessel before night, continued in perfect health."

The most striking and characteristic morbid effects of miasmata, are intermittent and remittent bilious fevers; but they are believed to be capable of producing diarrhœa, cholera, colic, dysentery, diseases of the liver and kidneys, gastric derangements, neuralgia, &c.

The biliary functions suffer the most, so much so, that in some countries the disease is known under the name of the *Gall Fever*. The frequent concentration of the blood in the internal parts may afford a reasonable explanation of these phenomena.

Inhabitants of malarious districts are apt, even when laboring under no well-marked and definite complaint, to exhibit signs of feeble health, in their spare habit of body, sallowness of complexion, uncertain appetite, and irregular bowels; and persons are not unfrequently found with enlarged spleen or liver, swelled abdomen, and even dropsical symptoms.

The spleen is sometimes so enormously increased in bulk, as to be *felt*, and even its outlines *seen* through the integuments of the abdomen. It has been known to weigh nearly eleven pounds! So common is this state of the spleen, that it is usually called *Ague Cake*. Whenever the abdominal circulation is much embarrassed, and the abdominal veins gorged—as they must be during the cold stage of an Intermittent—the spleen in particular becomes distended with blood. This happens constantly when the passage of the blood through the portal vessels is impeded by diseases of the liver. This distention does not probably subside at once. If the paroxysms of Ague be frequently repeated, we may understand how the spleen may become fuller of blood on each successive occasion. It may be that a portion of the blood coagulates, or that inflammation of a slow kind is set up in the stretched covering of that organ. At all events, this is a very common sequel of Ague; and it cannot be doubted that the repeated congestions of the internal vessels are the determining causes of the Ague Cake.

Diseases, usually the result of miasmata, sometimes occur epidemically, with all the characters of the cases that are obviously of local origin. Whether, in such instances, the cause may be the same as that of the identical endemic affections, it is impossible to determine; for the circumstances in relation to temperature, atmospheric moisture, and the character of vegetation, in the different seasons during which the epidemic has prevailed, have been so variable, that no tolerably certain inference can be deduced from them. From the fact, however, that the disease usually appears at the same season, as well as from their identity of nature, there seems to be good reason for ascribing them to the same malarious influence. But the peculiar condition of things which causes the development of this influence over wide regions where it had been before but little known, remains quite concealed.

The poisonous effects of malaria upon the liver are such as to render this important organ almost inactive. The hepatic ducts become obstructed, and the bile that is secreted is re-absorbed into the blood, and carried into every part of the system, instead of passing into the bowels, and producing its natural purgative effect.

In hot climates, the liver and its appendages are kept in an undue state of excitement, both from the direct stimulant influence of heat upon that organ, and from the additional duty which it has to perform, in the elimination of carbonaceous matter. A certain excess of carbon is introduced with the food, which is thrown off partly by the lungs and skin, in the form of carbonic acid, and partly by the liver in the form of fatty matter. That part of it which is converted into carbonic acid, answers the additional purpose of affording animal heat; but, as little of this is needed in hot countries, there is less of the acid formed, and a greater proportion of carbon must consequently escape

by the liver. Hence is established a predisposition to biliary and gastrointestinal diseases.

The stomach and kidneys are among those organs which are sensibly affected by this wide-spread poison ; and it is not strange that when these important organs cease to perform the duty which nature has assigned to them, that the result should be a general derangement of the whole system.

Neuralgia, periodical Headache, and Tic Doloureux, are modified forms of Intermittent Fever, and are produced from the same cause as Ague—viz., the miasm of marshes, or malaria, which mysteriously exerts its primary or chief influence apparently upon the nervous system.

Wherever the malaria prevails, it produces its peculiar consequences chiefly in certain seasons ; and it is in the autumn especially that agues and aguish fevers occur ; and the hotter and drier the preceding summer, the more frequent and fatal are the autumnal fevers. Agues may, however, attack a person at any time ; but they are much more common in spring and in autumn than in the other seasons of the year. Yet it is one of those disorders to which all persons, at all periods of their existence, seem to be susceptible when exposed to the influence of the exciting cause.

Each paroxysm of an Intermittent Fever, when quite regular and fully formed, is composed of three distinct stages ; and they are severally named, from the phenomena that characterizes them, the *cold*, the *hot*, and the *sweating* stages.

The attacks of this disease usually return with great regularity, and have in consequence been distinguished by names having reference to the periods of their visits. From this characteristic they have been divided into the *Quotidian*, returning after a lapse of twenty-four hours ; the *Tertian*, returning after a lapse of forty-eight hours ; and the *Quartan*, returning after a lapse of seventy-two hours ; and so on until the interval extends to nine or ten days.

A person who is on the brink of a paroxysm of Ague, experiences a sensation of debility ; he becomes weak, languid, listless, and unable to make any bodily or mental exertion. He begins to sigh, and yawn, and stretch himself ; and he soon feels chilly, particularly in the back, along the course of the spine ; the blood deserts the superficial capillaries ; he grows pale ; his features shrink ; and his skin is rendered dry and rough, drawn up into little prominences, such as may at any time be produced by exposure to external cold. Presently the slight and fleeting sensation of cold, first felt creeping along the back, becomes more decided and more general ; the patient *feels* very cold, and he acts and *looks* just as a man does who is exposed to intense cold, and subdued by it ; he trembles and shivers all over ; his teeth chatter ; his hair bristles slightly from the constricted state of the integuments of the scalp ; his face, lips, ears, and nails, turn blue ; his respiration is quick and anxious ; his pulse frequent sometimes, but feeble ; and he complains of pains in the head, back, and loins ; all the secretions are usually diminished ; his bowels are confined, and his tongue is dry and white.

After this state of general distress has lasted for a certain time, it is succeeded by another of quite an opposite kind. The cold shivering begins to alternate with flushes of heat, which usually commence about the face and neck. By degrees the coldness ceases entirely—the skin recovers its natural color and smoothness—the collapsed features and shrunken extremities resume their ordinary condition and bulk. But the reaction does not stop here ; it goes beyond the healthy line. The face becomes red and turgid—the general surface hot, pungent, and dry—the temples throb—a new kind of headache is induced—the pulse becomes full and strong, as well as rapid—the breathing

is again deep, but oppressed—the urine is scanty but high-colored—the patient is exceedingly uncomfortable and restless. At length another change comes over him: the skin, which, from being pale and rough had become hot and level, but harsh, now recovers its natural softness; a moisture appears on the forehead and face; presently a copious and universal sweat breaks forth, with great relief to the feelings of the patient; the thirst ceases; the tongue becomes moist; the urine plentiful but turbid; the pulse regains its natural force and frequency; the pains depart; and by and by the sweating also terminates, and the patient is again nearly as well as ever. This is certainly a very remarkable sequence of phenomena: and it would appear still more remarkable if it were less familiar to us. The earlier symptoms are all indicative of debility, and of a depressed state of the nervous system. There is the same sensation of exhaustion, with incapacity of exertion, which is produced by fatigue. The sighing, yawning, and stretching, all indicate debility. The paleness of the surface, and constriction of the skin, and collapse of the features, are all owing to the retirement of the blood from the superficial capillaries.

The skin shrinks, but the parts containing the bulbs of the hair cannot contract so much as the other parts, and therefore the surface becomes rough, and the hairs bristle up. The coldness of the skin is another consequence of the emptiness of its blood-vessels; and the tremors, which are always indicative of debility, seem to depend upon the coldness. The necessary accumulation of blood in the larger and internal vessels, offers a reasonable explanation of the distressed and anxious breathing.

Some writers have spoken of the hot stage, as though it were a necessary consequence of the cold. But if the cold fit be in any sense or degree the cause of the hot fit, it can only be so partially. The cold stage may occur and never be followed by the hot; or the hot stage may come on without any previous cold stage; and when they do both happen, they are not by any means proportioned to each other. When we thus see that a supposed cause is not always followed by the effect, and that the effect is sometimes produced without the agency of the supposed cause, and also that the supposed cause and the effect are not proportioned to each other, we cannot but conclude that the supposed cause is at most but a partial and accessory cause. We can more easily conceive how the hot fit may conduce to bring on the sweating stage.

The stronger action of the heart, and the more forcible propulsion of the blood, will fill the superficial vessels, and in this way the natural secretions may be restored. We see exactly the same thing happen when the force of the circulation is increased by exercise: the extreme vessels receive a larger supply of blood, and sweat ensues.

The period which elapses between the *termination* of one paroxysm of Ague and the commencement of the next, is called an *intermission*; while the period that intervenes between the *beginning* of one paroxysm and the beginning of the next, is called an *interval*. As the paroxysms are liable to vary in length, the intermissions may be very unequal, even when the intervals are the same. When the intermissions are perfect and complete, the patient resuming the appearance and sensations of health, the disorder is an *intermittent fever*. When the intermissions are imperfect, the patient remaining ill, and feverish, and uncomfortable, in a less degree than during the paroxysm, then the complaint is said to be a *remittent fever*.

Sometimes the paroxysm is incomplete; it is shorn of one or more of its stages: the heat and sweating occur without any previous rigors; or the patient shakes, but has no subsequent heat, or the sweating stage is the only

one of the three that manifests itself. These fragments of a fit are often noticeable when the complaint is about taking its departure; but they may also occur at other periods of the disease. Sometimes there is no distinct stage at all; but the patient experiences frequent and irregular chills, is languid, uneasy, and depressed. This state is generally known as the *dumb Ague*.

Intermittent Fever, being the mildest form of miasmatic fever, is that which ordinarily occurs in situations, and at periods, when the miasmatic influence is least intense, and in persons who, from habit or any other cause, are least susceptible to injury from it. Though this particular cause may be essential, yet there are others which very much assist its action. The poison seems to find a more ready entrance into the system, when exhausted by fatigue or hunger, debilitated by previous disease or mental depression, and during sleep. It often lurks in the system without obvious effect, for a longer or shorter period of time, causing rather a predisposition to the disease than the disease itself. Under these circumstances, any exciting cause may call the fever into action; and sometimes an attack is produced which might have otherwise been avoided. Exposure to the heat of the sun, a cold bath, excessive exertion, or mental excitement, may give rise to a paroxysm. The contrast between the cold of the mornings and evenings, and the heat of the middle of the day, favors the development of the disease in the latter part of summer, and the beginning of autumn.

Among all the circumstances which predisposes to fever and ague, debility, no matter how produced, has a powerful influence.* But the strongest predisposing cause of all is an actual occurrence of the disease itself. The effect of former attacks upon the system is such that the complaint may be reproduced by agencies which, under any other circumstances, would be quite inoperative. The disease leaves the system in a condition, in which injurious influences, other than malaria, may of themselves be sufficient to renew it. It brings into play a new order of exciting, or rather, of re-exciting causes. If a person were never exposed to the poisonous effects of malaria, he would never have an attack of intermittent fever; but having once had it, he may many times have it again, although he should never again be subjected to the direct influence of malaria.

Remittent or bilious fever occurs more or less in all parts of the United States, lying between the Northern Lakes and the Gulf of Mexico, and on the shores of the Pacific, but is much more frequent in the middle and southern sections than in the northern. It is rare in the mountainous and hilly districts of our country, except where there are large streams or standing water. The situations in which the disease is most prevalent are the valleys of streams, the borders of lakes or ponds, the neighborhoods of marshes, and the rich prairies of our Western States. It is in general a much more serious disease in the southern and south-western sections of the United States, than in those portions of the north which are still within the limits of its prevalence. But the disease is not confined to our own country. It is endemic almost everywhere in hot climates, and especially where heat, moisture, and decaying vegetable matter act conjointly. Comparatively mild in temperate latitudes, it becomes extremely fatal in many places within the tropics. It is the disease which has raged so fearfully in the East Indies, Africa, the Mediterranean, and South America, and which has depopulated the Campagna of

* Dr. Thomas Watson, in one of his lectures, states that "soldiers in the British Army have been exposed to the exciting cause, without becoming affected by it while strong and in good health, and have fallen ill of Intermittent Fever upon being weakened by exertion and fatigue."

Rome, and rendered intertropical Africa uninhabitable by whites. It has frequently received names from the localities where it prevails. Thus we hear of the *African fever*, the *Bengal fever*, the *Walcheren fever*, the *Chagres*, and the *Panama fever*, &c. Under whatever name the disease is known, it is essentially the same, varying only in its intensity, and is produced from the same miasmatic cause.

The manner in which the noxious effluvia, called miasmata or malaria, is produced, and its effect upon the human system, has been stated in the foregoing, as well as the symptoms which indicate a near approach of Intermittent Fever, or as it is commonly called, Fever and Ague. As this is the most common form of bilious disease, it requires our particular attention. The mode usually adopted of treating it, has been invariably with *tonics*, administered for the purpose of *breaking the chill*, while nothing is done to counteract the effect of the malaria and remove the disease. It should be borne in mind, that simply breaking the chill, is very far from effecting a cure; the disease is only *suspended*, and again returns upon exposure to any of those causes which favor its reproduction.

The Lexipyreta has been prepared (after a thorough knowledge of the pathological character of the disease,) with particular reference to the permanent removal and cure of the disease; and the success which it has met with in the treatment of Fever and Ague, proves it to be what its name indicates—a medicine, possessing the power to abate, or drive away a fever. Its effect upon the human system is to purify the blood,* (which is greatly altered in all malarious diseases,)—promote the discharge of bile—remove obstructions of the liver, and excite all the diseased organs to a healthy action. It is a powerful *deobstruent* medicine, designed particularly to counteract the baneful effects of malaria upon the human body. For the *prevention* of Fever and Ague, it will be found no less effectual, as well as for the cure of all other Bilious Diseases, Jaundice, Liver complaint, Indigestion, Dyspepsia, &c.

Relapses are very frequent in cases of Intermittent Fever, and give the unfortunate sufferer much trouble. By ascertaining the period at which the disease is disposed to return, which is remarkably regular in each case, the recurrence may almost always be prevented, and the disease finally eradicated, by a timely and persevering use of the Lexipyreta. The importance, therefore, of having the Remedy at hand must be obvious to all. It is a *vegetable* preparation, and contains *no mineral substance whatever*.

Persons travelling through infected districts, either South or West, will find it a sure preventive; and to emigrants from healthy localities it will prove invaluable; by using it during the sickly season, they need apprehend but little danger.

The Lexipyreta is not designed to cure every disease incident to the human frame, yet it is confidently believed that a timely resort to this remedy would be the means of saving the lives of a large portion of those who are yearly numbered among the victims of bilious diseases.

With the medical profession, the able works of Doctors Wood and Watson, on the practice of medicine, are justly regarded as among the most valuable contributions to medical science; and in the compilation of this pamphlet, these, and other works of acknowledged reputation have been freely drawn upon, consequently, nothing is advanced which is not sustained by medical authority of the highest respectability.

In offering the Lexipyreta to the notice of a discerning public, the proprietor simply remarks that he does so, relying only upon its intrinsic merits, to commend it to popular favor.

* Dr. Stevens asserts that the blood is altered essentially in character by the miasmatic cause of bilious fevers, and evinces this change for days or even weeks before the fever appears.

DIRECTIONS.

Should the patient, at the time of commencing the use of the Lexipyreta, be suffering from Fever and Ague, Dumb Ague, Chill Fever, or Intermittent Fever in any form, it will be necessary to take it four times a day, and so continue the use of it until the periodical return of the disease is arrested, which is most generally accomplished after taking ten or twelve doses; so prompt is it in its action, that many times the patient experiences no trouble or inconvenience after taking it two or three times. The best time for taking it is about a quarter of an hour before the usual time of meals, and on going to bed.

After the disease ceases to return periodically, the remedy should be taken only three times a day, morning, noon, and night, until a complete and permanent cure is effected.

If the patient is costive, a dose of some kind of cathartic pills, or two or three five grain blue pills, should be taken. In most cases, however, the Lexipyreta will be found to have a sufficient purgative effect; in cases where it does not, the patient should take some laxative medicine every other night on going to bed.

The diet, during the continuance of the disease, should be light, digestible, nutritious, and unstimulating. For the first day or two, animal food should generally be avoided, and afterwards the lighter kinds should be used, such as milk, soft boiled eggs, and boiled meats, in connexion with farinaceous substances, and easily digested vegetables. Stimulating drinks should not be used; and the patient should always avoid eating a full meal, within two or three hours of the expected paroxysm, as the food does not digest during the fever, and sometimes serves as a source of injurious irritation.

It requires a much longer time to effect a cure in those cases where the patient has been for a long time suffering from the disease, or been for a long time subject to the primary exciting cause. It will, therefore, be necessary in such cases to take the Lexipyreta for several weeks to insure a perfect cure. *In all cases*, the medicine should be taken regularly, as directed; by so doing, its effects will be more certain, and require less time to eradicate the disease from the system.

For enlargement of the Spleen, or Ague Cake, it should be taken three times a day, and continued for two or three months in all cases which have been of long standing; by adopting this course, the patient will almost invariably experience the happy influence of the medicine, and this organ become reduced to its natural size.

For Remittent Fever, it should be taken three times a day, and continued until the health is restored.

For the cure of Jaundice, Liver Complaint, Indigestion, Dyspepsia, &c., it will be found equally effectual, taken in the usual doses.

Persons travelling in malarious sections of country, will find the medicine

to be an effectual preventive against Fever and Ague, if taken three times a day.

Should the medicine, in cases where the patient is of a weakly constitution, prove too laxative, the dose should be lessened until it has the desired effect.

The dose for a grown person is *two teaspoonsful*, taken in a small quantity of water; children from six to twelve years of age, *one teaspoonful*; from three to six years, *forty drops*; from one to three years, twenty-five drops; under one year, from ten to fifteen drops.

As before remarked, the Lexipyreta is entirely a vegetable preparation, and may be administered under all circumstances, with perfect safety, to either young or old.

The bottle should be kept well corked, and thoroughly shaken before each dose.

TESTIMONIALS

IN FAVOR OF THE EXTRAORDINARY VIRTUES OF

DEVOTION'S LEXIPYRETA,

IN THE TREATMENT AND CURE OF

Fever and Ague, Chill Fever, Intermittent and Remittent Fevers, Dumb Ague, Jaundice, Liver Complaint, Enlargement of the Spleen and Liver, and all the various forms of Bilious Diseases, incident to the Southern and Western States.

Among the many testimonials which have been received in favor of the extraordinary virtues of the Lexipyreta, the following only are selected:

From Mr. J. W. WOODMANSEE, of Rosendale, New York, addressed to the proprietor, dated

SAN FRANCISCO, California, Sept. 16th, 1849.

Dear Sir—It is with great pleasure that I recommend your Lexipyreta as a *safe and effectual* remedy for Fever and Ague.

I left Sacramento City on the 14th of August last, and arrived at this place on the 6th inst. During the time that I was making the passage, I was exposed to the influence of the malaria which is so abundant at different points on the river, and on reaching this place, was completely unfit for labor, having been afflicted with Fever and Ague for several days. I immediately commenced taking the Lexipyreta according to directions, and in two days was completely cured. I cannot too strongly recommend it to those afflicted with Fever and Ague as a *safe and sure remedy* for this distressing complaint. No one should think of going to the mines without being provided with this *invaluable* remedy.

J. S. WOODMANSEE.

From CLINTON COLTON, Esq., of New York, to the proprietor, under date of

SAN FRANCISCO, Sept. 18th, 1849.

Dear Sir—I have used your Lexipyreta with the happiest effect for the cure of Remittent Fever and Fever and Ague. I have also seen it used by others, and in all cases it has given the most perfect satisfaction. I do not hesitate to recommend it to those afflicted with Fever and Ague, or any form of Bilious Fever, as a *safe and sure* remedy.

CLINTON COLTON.

*Copy of a letter from Mr. CHARLES GATES, of Worcester, Mass., dated
SAN FRANCISCO, Cal., January 4th, 1850.*

DEAR SIR—While laboring at Benicia some three months ago, I was attacked with that most distressing and unpleasant disease called Fever and Ague. A friend of mine, who had only a few days before been cured of the same disease by the use of your Lexipyreta, had a part of a bottle left, which he presented to me, remarking at the same time that it would cure me. I commenced taking it according to directions, and sure enough in a few days I was completely cured. Since that time I have been exposed to the miasmal influences so abundant here, and about two weeks since was again attacked with this disagreeable complaint. I immediately procured a bottle of the Lexipyreta, and commenced taking it, and I am gratified in being able to inform you that I did not experience a *chill* after taking the first dose. My general health has very much improved since I commenced using the remedy, and I am free to say that I have not enjoyed so good health since I have been in the country (a period of five months), as I enjoy at this moment. I cannot be too grateful for the relief which I have thus received at your hands, and I cheerfully add my testimony in its favor, advising all who are afflicted with Fever and Ague to give it a trial.

Yours, respectfully,

CHARLES GATES.

From Capt. GEORGE ELDRIDGE, of Mystic, Conn.

SAN FRANCISCO, Dec. 24th, 1849.

TO JOHN L. DEVOTION:—

DEAR SIR—Having experienced the good effects of your Lexipyreta, I take great pleasure in recommending it to those afflicted with Fever and Ague, Dumb Ague, &c., as a safe and effectual remedy. Its action in my case was of the most satisfactory character. For the last six months I have navigated the River Sacramento, and during this time I have had numerous opportunities of witnessing its beneficial effects when administered to others, and I have not heard of a single instance where it has failed to cure.

I believe it to be a most valuable medicine for the diseases for which it is recommended, and one in which the public may place the utmost confidence.

Respectfully yours,

GEORGE ELDRIDGE.

*Extract of a letter from Mrs. MATHEWS, of St. Joseph's County, Michigan,
addressed to the proprietor, dated February, 20th, 1850.*

She says:—I think, when the Lexipyreta is thoroughly introduced and known as a cure for Fever and Ague, that it will stand unrivalled as a sovereign remedy. I made use of it in our family last summer, as it was an unusual time for the Ague, and it proved effectual in every case. My husband was attacked *very* severely, but the Lexipyreta cured him in a few days. In short, I must say that I have such an exalted opinion of this medicine, that I should never be willing to be without it.

From Mr. THOMAS GATES, of Worcester, Mass., dated

SAN FRANCISCO, January 30th, 1850.

DEAR SIR—Having experienced the good effects of your Lexipyreta in the cure of Fever and Ague, I can most cheerfully add my testimony in favor of



its sanative powers. I was attacked with this unpleasant complaint while at the mines in September last, and being unable to procure anything to check the progress of the disease, I was obliged to leave. On my arrival at Sacramento City I was fortunate enough to procure a bottle of your valuable medicine, and after taking a few doses was completely cured. I can with confidence recommend it to those afflicted with Fever and Ague, as a safe, sure, and effectual remedy.

Yours truly,

THOMAS GATES.

Mr. SAMUEL ADAMS, a highly respectable Druggist of San Francisco, in a letter addressed to the proprietor, under date of August 30th, 1850, writes as follows:—"Your Lexipyreta sustains its character, and sells without any effort of mine, when one bottle goes, several others are seen to follow in its wake. It works its own way along."

From the Sacramento Transcript of April 3d, 1850, published at Sacramento City, California.

The attention of our readers is directed to an advertisement in another part of the paper, headed "Fever and Ague." Persons suffering from this distressing complaint, will find that "Devotion's Lexipyreta" is no humbug, and that it will perform a speedy cure in all cases. We have seen the article administered several times with the happiest effects, and do not hesitate to recommend it as a valuable medicine.

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